REQUEST FOR PROPERTY TOUR

The State of Tennessee will be holding property tours of 900 and 1000 2nd Avenue North Nashville, TN on dates and times set forth below. These tours are made available by appointment only. Please indicate in the box below, of the time you will be at the site. Please return this form as follows:

Brannon Butler

Brannon.Butler@tn.gov

State of Tennessee Real Estate Asset Management
312 Rosa L. Parks Avenue, 24th Floor
Nashville, TN 37243

Should you have any questions, please do not he sitate to contact us at (844) 660-8100.

Date	Day of week	Times available	Time Requested	# of Attendees
March 17 th , 2021	Wednesday	12:00 pm – 3:00 pm		
March 24 th , 2021	Wednesday	12:00 pm – 3:00 pm		
March 31 st , 2021	Wednesday	12:00 pm – 3:00 pm		

WAIVER AND RELEASE OF LIABILITY THE STATE OF TENNESSEE DEPARTMENT OF GENERAL SERVICES

WHEREAS, as a condition to The State of Tennessee permitting me to enter onto State property, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

- (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons or conditions on the property, for my death, disability, personal injury, property damage, property theft, sickness or disease, or actions of any kind which may hereafter occur to me due to my presence on State property, THE FOLLOWING ENTITIES OR PERSONS: Labor Workforce and Development, State of Tennessee (State), including the Department of General Services and/or their employees, representatives, and agents;
- (B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of my presence on State property, whether caused by the negligence of the undersigned or otherwise.

I acknowledge that State and their employees, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT.

Signature:	
Print Name:	
Date:	